



State of New Jersey
Department of Environmental Protection
Hazardous Waste Regulation Program
Manifest Section
P.O. Box 414, Trenton, NJ 08625-0414

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved.

OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address USEPA REGION II 2890 WOODBRIDGE AVENUE BLDG 209 EDISON NJ 08837		NJCE500G		9999		A. State Manifest Document Number NJ 4145055		B. State Generator's ID (Gen. Site Address) 2ND AND WATER STREET PERTH AMBOY, NJ 08861	
4. Generator's Phone (732 906-6977)		5. Transporter 1 Company Name ONYX ENVIRONMENTAL SVCS L.L.C.		6. US EPA ID Number NJ D 080631369		C. State Trans. ID-NJDEP Decal No. -		D. Transporter's Phone (973 347-7111)	
7. Transporter 2 Company Name		8. US EPA ID Number		9. Designated Facility Name and Site Address ONYX ENVIRONMENTAL SERVICES L.L.C. 1 EDEN LANE FLANDERS, NJ 07836		10. US EPA ID Number NJ D 098053659		E. State Trans. ID-NJDEP Decal No. -	
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) HM a. X WASTE ACETYLENE, DISSOLVED 2.1, UN1001		12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		1. Waste No.	
b.		c.		d.		e.		f.	
J. Additional Descriptions for Materials Listed Above G/I ACETYLENE CYLINDER		K. Handling Codes for Wastes Listed Above		a.		b.		c.	
15. Special Handling Instructions and Additional Information PACKING SLIPS ATTACHED FOR CLARIFICATION EMERGENCY NUMBER- INFOTRAC: 800 535-5053		16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.		Printed/Typed Name G. RUSAS		Signature [Signature]		Month Day Year 10/1/703	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name G. RUSAS		Signature [Signature]		Month Day Year 10/1/703		18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature [Signature]	
19. Discrepancy Indication Space		478864		[Barcode]		20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name		Signature [Signature]	
Month Day Year		Month Day Year		Month Day Year		Month Day Year		Month Day Year	

GENERAL INFORMATION

The Hazardous Waste manifest is designed to track waste from the point of generation to final disposal (cradle to grave). In order to accomplish this goal, it is essential that all items on the manifest be completed correctly. Incomplete, incorrect or illegible manifests are violations of the law, and could make you subject to civil or criminal liabilities as specified in the New Jersey Hazardous Waste Regulations.

INSTRUCTIONS-IMPORTANT: READ ALL INSTRUCTIONS BEFORE COMPLETING

State & Federal regulations require Generators, Transporters, and Treatment, Storage & Disposal Facilities (TSDFs) to use this form and if necessary the continuation sheet for both inter- and intrastate shipments. Continuation sheets may be purchased commercially and photocopied to provide copies as described below.

The New Jersey manifest contains 8 copies. ALL COPIES MUST BE LEGIBLE. This form is designed for use on a 12 pitch (elite) typewriter; a firm ball point pen may also be used only if you press down HARD. The 8 copies must be filed with the appropriate party as they are completed. COPY DISTRIBUTION is as follows:

- ORIGINAL: DESTINATION STATE-TSDF must mail original to the state regulatory agency where the facility is located.
- COPY 2: GENERATOR STATE- The TSDF mails this copy back to the state regulatory agency where the waste was generated.
- COPY 3: GENERATOR COPY- The TSDF mails this copy back to the generator of the waste.
- COPY 4: TSDF COPY-TSDF keeps this copy for his records.
- COPY 5: TRANSPORTER COPY-The transporter keeps this copy for his records. NOTE: If a *continuing transporter* is used the generator is responsible for supplying him with a legible photocopy, which must contain required signatures.
- COPY 6: DESTINATION STATE-The generator mails this copy to the state regulatory agency where the designated facility (TSDF) is located.
- COPY 7: GENERATOR STATE-The generator mails this copy to the state regulatory agency where the waste was generated.
- COPY 8: GENERATOR COPY- The generator keeps this copy for his records.
- ALL 8 COPIES MUST BE LEGIBLE

MANIFEST FORM ACQUISITION

1. If the destination (consignment) state supplies a manifest & requires its use, then the generator is obligated to obtain the manifest from that state.
2. If the destination state does not supply the manifest, but the generator state does, then the generator is obligated to obtain the manifest form from the generator state.
3. If neither the generator state or the consignment state supplies the manifest, then the generator may obtain the manifest from any source.

GENERATOR SECTION

- Item 1: GENERATOR'S EPA ID NO-MANIFEST DOCUMENT NO. - Enter the generator's EPA identification number. The manifest document number is a unique 5-digit number the generator assigns to each manifest, for his recordkeeping purposes. Use of serially increasing numbers (e.g. 00001, 00002, etc.) is recommended.
- Item 2: PAGE 1 OF - Enter the total number of pages used to complete this manifest, i.e. the first page plus the number of continuation sheets, if any.
- Item 3: GENERATOR'S NAME & MAILING ADDRESS- Enter the name (as notified to EPA) & mailing address of the generator. The address should be the location that will manage the returned manifest forms.
- Item 4: GENERATOR'S PHONE NUMBER- Enter a telephone number with area code where an authorized agent of the generator can be reached in an emergency.
- Item 5: TRANSPORTER 1 COMPANY NAME: Enter the company name (as notified to EPA) of the first transporter who will transport the waste.
- Item 6: US EPA ID NUMBER- Enter the EPA identification number of the first transporter identified in item 5.
- Item 7: TRANSPORTER 2 COMPANY NAME-If applicable, enter the company name (as notified to EPA) of the second transporter who will transport the waste, if more than two (2) transporters will be used, use a continuation sheet and list the transporters in the order they will be transporting the waste.
- Item 8: US EPA ID NUMBER-If a second transporter is used, enter the EPA identification number of the second transporter identified in item 7.
- Item 9: DESIGNATED FACILITY NAME & SITE ADDRESS- Enter the company name and site address (as notified to the EPA) of the treatment, storage, or disposal facility (TSDF) designated to receive the waste listed on this manifest. The address must be the site address, which may differ from the mailing address.
- Item 10: EPA ID NUMBER- Enter the EPA identification number of the designated TSDF (or waste reuse facility) listed in item 9.
- Item 11: USDOT DESCRIPTION-Enter the correct USDOT shipping name, hazard class or division, the identification number and the packing group (49 CFR 172.202). The word waste must appear as part of the USDOT shipping name if the waste is a federal RCRA hazardous waste (49 CFR 172.101). For a waste with a n.o.s. designation enter the information as required by 49 CFR 172.203. Enter additional shipping description information as required by 49 CFR 172 Subpart C. If more than 4 wastes are being shipped, a second manifest or continuation sheets should be used. For information on USDOT waste descriptions call your USDOT regional office.
- Item 12: CONTAINERS (NO. & TYPE)-Enter the number of containers for each waste and the appropriate abbreviations from Table 1 (below) for the type of container used:

TABLE 1
CONTAINER TYPES

DM-Metal drums, barrels, kegs
DW-Wooden drums, barrels, kegs
DF-Fiberboard or plastic drums, barrels, kegs
TP-Tanks portable
TT-Cargo tanks (Tank trucks)
TC-Tank cars
DT-Dump truck
CY-Cylinders
CM-Metal boxes, cartons, cases (including roll-offs)
CW-Wooden boxes, cartons, cases
CF-Fiber or plastic boxes, cartons, cases
BA-Burlap, cloth, paper/plastic bags

- Item 13: TOTAL QUANTITY-Enter the total quantity of waste described on each line.
DO NOT USE FRACTIONS
- Item 14: UNIT (Wt./Vol.)-Enter the appropriate abbreviation from Table II (below) for the unit of measure used in determining the total quantity of waste described on each line.

TABLE II
UNITS OF MEASURE

G-Gallons (liquids only)
P-Pounds
T-Tons (2000 lbs.)
Y- Cubic Yards
L-Liters (liquids only)
K-Kilograms
M-Metric Tons (1000 kg)
N- Cubic Meters

- Item 15: SPECIAL HANDLING INSTRUCTIONS AND ADDITIONAL INFORMATION - Use this space to indicate special transportation, treatment, storage, disposal, or Bill of Lading information, if any. If an alternate facility is designated, note it here. For INTERNATIONAL SHIPMENTS, generators must enter the point of departure (city & state) in this space. This space may also be used for emergency response telephone numbers, and any other information the generator is required to include about the shipment in accordance with 49 CFR Part 172, Subpart G as applicable for RCRA hazardous waste and USDOT hazardous materials.
- Item 16: GENERATOR'S CERTIFICATION - The Generator must read, sign (by hand) and date the certification. This must be done the day the transporter picks up the waste shipment (date of receipt by transporter). If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, air) inserted in the space. If another mode in addition to the highway mode is used, enter the appropriate additional mode (e.g. "and rail") in this space.
- Item A: STATE MANIFEST DOCUMENT NUMBER - Number preprinted by New Jersey except on the continuation sheets. Enter this number on each continuation sheet attached to a manifest.
- Item B: STATE GEN ID - The State Generator ID is the street address of the waste generation site. If the mailing address and the site address are the same, enter "same".
- Item C: STATE TRAN #1 ID - Enter the New Jersey state permit number. This must include both the transporter's permit number and the decal number of the hazardous waste transport unit or hazardous waste vehicle which contains the waste. For rail shipment(s) enter the alpha numeric ID number assigned to the railcar in lieu of the decal number.
- Item D: TRANSPORTER PHONE - Enter a telephone number with area code where an authorized agent of the transporter can be reached.
- Item E: STATE TRAN #2 ID - If applicable, enter the New Jersey State permit number of the waste carrying portion of the second vehicle.
- Item F: TRANSPORTER PHONE - If applicable, enter a telephone number with area code where an authorized agent of the second transporter may be reached.
- Item G: STATE FACILITY'S ID - No entry is required by New Jersey.
- Item H: FACILITY PHONE - Enter a telephone number with area code of the TSDF designated to receive the waste listed on the manifest.
- Item I: WASTE NO.-Enter the 4-digit hazardous waste number as it appears in N.J.A.C. 7:26G-5.1 et seq. (For example "K047" is the waste number designated for pink/red water from TNT operations.) The proper waste number that accurately describes the shipment, shall be determined according to the hierarchy at N.J.A.C. 7:26G-6.2.
- Item J: ADDITIONAL DESCRIPTIONS FOR MATERIALS LISTED ABOVE - Enter description of analysis for any waste which does not have a complete USDOT shipping description or has an n.o.s. designation. Enter a general description of the waste stream, (i.e. groundwater contaminated with creosote and copper sulfate). Additionally, for any n.o.s. entry in item 11 which does not conform to the requirements at 49 CFR 172.203(K) enter the two components, and their percentages, which most predominantly contribute to the hazards of the mixture or solution. Enter the physical state (S = Solid, L = Liquid, G = Gas, SL = Sludge) EPA hazard codes (I = Ignitable, C = Corrosive, R = Reactive, E = TCLP, H = Acute Hazardous, T = Toxic). Enter additional information as required by the waste code hierarchy at N.J.A.C. 7:26-G6.2.

TRANSPORTER SECTION

- It is a violation by the transporter if he accepts hazardous waste from a generator who fails to properly complete the manifest, transports waste to an unauthorized facility, and/or fails to obtain the date and handwritten signature, of the next hauler owner/operator of the TSD facility on the manifest.
- Item 17: TRANSPORTER 1 ACKNOWLEDGEMENT-Print or type the name of the person accepting the waste on behalf of the first transporter. That person must acknowledge acceptance of the waste described on the manifest by signing and entering the date of receipt.
- Item 18: TRANSPORTER 2 ACKNOWLEDGEMENT-If applicable, follow instructions for item 17 for the second transporter.
- NOTE: ALL HAZARDOUS WASTE TRANSPORTERS OPERATING IN NEW JERSEY MUST HAVE A VALID NEW JERSEY HAZARDOUS WASTE TRANSPORTER'S PERMIT.
- DESIGNATED FACILITY (TSDF) SECTION
- Item 19: DISCREPANCY INDICATION SPACE-The authorized representative of the designated facility must note in this space any significant discrepancy between the waste described on the manifest and the waste actually received at the facility. Any rejected materials should be listed here, along with an explanation of the disposition of the rejected wastes. Owners and operators of facilities located in authorized States (i.e., those States that received authorization from the U.S. EPA to administer the hazardous waste program) should contact their State agency for information on State Discrepancy Report requirements.
- Item 20: FACILITY OWNER/OPERATOR CERTIFICATION-Print or type the name of the person receiving the waste on behalf of the owner/operator of the designated TSDF. That person must acknowledge receiving the waste described on the manifest by signing and entering the date of receipt.
- Item K: HANDLING CODES-TSDF SHOULD COMPLETE-Enter the ultimate handling method utilized at the designated facility for each waste. Only the following process codes may be used:
Storage = S01 (Container); S02 (Tank); S04 (Surface Impoundment); S05 (Other-Specify);
Treatment = T01 (Tank); T02 (Surface Impoundment); T03 (Incinerator); T04 (Other-specify);
Disposal = D79 (Injection Well); D80 (Landfill); D81 (Land Application); D82 (Ocean Disposal);
D83 (Surface Impoundment); D84 (Other-Specify)
- *NOTE For interstate shipments you may be required to comply with the manifesting requirements of both the consignment and generator states regarding the completion of specific information included in lettered items A-K. Please check with both generator and consignment states for specific requirements. New Jersey requires that all information be filled in except for item "G".

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimates including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223. U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503



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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NJCE5RG	Manifest Document No. 9999	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address USEPA REGION II 2690 WOODBRIDGE AVENUE BLDG 209 EDISON NJ 08837				A. State Manifest Document Number NJA 4145055		
4. Generator's Phone (732) 906-6977 ATTN CRIS D'ONOFRIO				B. State Generator ID (Gen. Site Address) PERTH AMBOY, NJ 08861		
5. Transporter 1 Company Name ONYX ENVIRONMENTAL SVCS L.L.C.				6. US EPA ID Number NJ D 080631369		
7. Transporter 2 Company Name				C. State Trans. ID-NJDEP 50160		
8. US EPA ID Number				D. Transporter's Phone (732) 397-7111		
9. Designated Facility Name and Site Address ONYX ENVIRONMENTAL SERVICES L.L.C. 1 EDEN LANE FLANDERS, NJ 07836				E. State Trans. ID-NJDEP Decal No. - 087331		
10. US EPA ID Number NJ D 98053659				F. Transporter's Phone ()		
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) HM a. WASTE ACETYLENE, DISSOLVED 2.1, UN1001				12. Containers No. Type 001 DM 00200 F D001		
b.				13. Total Quantity 00200		
c.				14. Unit Wt/Vol F		
d.				15. Waste No. D001		
J. Additional Descriptions for Materials Listed Above G/I ACETYLENE CYLINDER				K. Handling Codes for Wastes Listed Above a. 5011 c.		
a.				b.		
b.				d.		
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Printed/Typed Name Cris D'Onofrio				Signature Cris D'Onofrio Month Day Year 06/17/03		
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name GIANNI ROSAS				Signature Gianni Rosas Month Day Year 06/17/03		
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name				Signature Month Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Peter E Frickling Signature Peter E Frickling Month Day Year 06/17/03						

NJA 4145055

GENERAL INFORMATION

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- ORIGINAL: DESTINATION STATE-TSDF must mail original to the state regulatory agency where the facility is located.
- COPY 2: GENERATOR STATE- The TSDF mails this copy back to the state regulatory agency where the waste was generated.
- COPY 3: GENERATOR COPY- The TSDF mails this copy back to the generator of the waste.
- COPY 4: TSDF COPY-TSDF keeps this copy for his records.
- COPY 5: TRANSPORTER COPY- The transporter keeps this copy for his records. NOTE: If a continuing transporter is used the generator is responsible for supplying him with a legible photocopy, which must contain required signatures.
- COPY 6: DESTINATION STATE- The generator mails this copy to the state regulatory agency where the designated facility (TSDF) is located.
- COPY 7: GENERATOR STATE- The generator mails this copy to the state regulatory agency where the waste was generated.
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MANIFEST FORM ACQUISITION

- If the destination (consignment) state supplies a manifest & requires its use, then the generator is obligated to obtain the manifest from that state
- If the destination state does not supply the manifest, but the generator state does, then the generator is obligated to obtain the manifest form from the generator state.
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GENERATOR SECTION

- Item 1: GENERATOR'S EPA ID NO-MANIFEST DOCUMENT NO. - Enter the generator's EPA identification number. The manifest document number is a unique 5-digit number the generator assigns to each manifest, for his recordkeeping purposes. Use of serially increasing numbers (e.g. 00001, 00002, etc.) is recommended.
- Item 2: PAGE 1 Of - Enter the total number of pages used to complete this manifest, i.e. the first page plus the number of continuation sheets, if any.
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- Item 4: GENERATOR'S PHONE NUMBER- Enter a telephone number with area code where an authorized agent of the generator can be reached in an emergency.
- Item 5: TRANSPORTER 1 COMPANY NAME- Enter the company name (as notified to EPA) of the first transporter who will transport the waste.
- Item 6: US EPA ID NUMBER- Enter the EPA identification number of the first transporter identified in item 5.
- Item 7: TRANSPORTER 2 COMPANY NAME- If applicable, enter the company name (as notified to EPA) of the second transporter who will transport the waste, if more than two (2) transporters will be used, use a continuation sheet and list the transporters in the order they will be transporting the waste.
- Item 8: US EPA ID NUMBER- If a second transporter is used, enter the EPA identification number of the second transporter identified in item 7.
- Item 9: DESIGNATED FACILITY NAME & SITE ADDRESS- Enter the company name and site address (as notified to the EPA) of the treatment, storage, or disposal facility (TSDF) designated to receive the waste listed on this manifest. The address must be the site address, which may differ from the mailing address.
- Item 10: EPA ID NUMBER- Enter the EPA identification number of the designated TSDF (or waste reuse facility) listed in item 9.
- Item 11: USDOT DESCRIPTION- Enter the correct USDOT shipping name, hazard class or division, the identification number and the packing group (49 CFR 172.202). The word waste must appear as part of the USDOT shipping name if the waste is a federal RCRA hazardous waste (49 CFR 172.101). For a waste with a n.o.s. designation enter the information as required by 49 CFR 172.203. Enter additional shipping description information as required by 49 CFR 172 Subpart C. If more than 4 wastes are being shipped, a second manifest or continuation sheets should be used. For information on USDOT waste descriptions call your USDOT regional office.
- Item 12: CONTAINERS (NO. & TYPE)- Enter the number of containers for each waste and the appropriate abbreviations from Table 1 (below) for the type of container used:

TABLE 1
CONTAINER TYPES

DM-Metal drums, barrels, kegs
DW-Wooden drums, barrels, kegs
DF-Fiberboard or plastic drums, barrels, kegs
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TC-Tank cars
DT-Dump truck
CY-Cylinders
CW-Metal boxes, cartons, cases (including roll-offs)
CWW-Wooden boxes, cartons, cases
CF-Fiber or plastic boxes, cartons, cases
BA-Burlap, cloth, paper/plastic bags

- Item 13: TOTAL QUANTITY- Enter the total quantity of waste described on each line.
DO NOT USE FRACTIONS
- Item 14: UNIT (Wt./Vol.)- Enter the appropriate abbreviation from Table II (below) for the unit of measure used in determining the total quantity of waste described on each line.

TABLE II
UNITS OF MEASURE

- G-Gallons (liquids only)
P-Pounds
T-Tons (2000 lbs.)
Y- Cubic Yards
L-Liters (liquids only)
K-Kilograms
M-Metric Tons (1000 kg)
N- Cubic Meters
- Item 15: SPECIAL HANDLING INSTRUCTIONS AND ADDITIONAL INFORMATION - Use this space to indicate special transportation, treatment, storage, disposal, or Bill of Lading information, if any. If an alternate facility is designated, note it here. For INTERNATIONAL SHIPMENTS, generators must enter the point of departure (city & state) in this space. This space may also be used for emergency response telephone numbers, and any other information the generator is required to include about the shipment in accordance with 49 CFR Part 172, Subpart G as applicable for RCRA hazardous waste and USDOT hazardous materials.
- Item 16: GENERATOR'S CERTIFICATION - The Generator must read, sign (by hand) and date the certification. This must be done the day the transporter picks up the waste shipment (date of receipt by transporter). If a mode other than highway is used, the word "highway" should be lined out and the appropriate mode (rail, water, air) inserted in the space. If another mode in addition to the highway mode is used, enter the appropriate additional mode (e.g. "and rail") in this space.
- Item A: STATE MANIFEST DOCUMENT NUMBER - Number preprinted by New Jersey except on the continuation sheets. Enter this number on each continuation sheet attached to a manifest.
- Item B: STATE GEN ID - The State Generator ID is the street address of the waste generation site. If the mailing address and the site address are the same, enter "same".
- Item C: STATE TRAN #1 ID - Enter the New Jersey state permit number. This must include both the transporter's permit number and the decal number of the hazardous waste transport unit or hazardous waste vehicle which contains the waste. For rail shipment(s) enter the alpha numeric ID number assigned to the railcar in lieu of the decal number.
- Item D: TRANSPORTER PHONE - Enter a telephone number with area code where an authorized agent of the transporter can be reached.
- Item E: STATE TRAN #2 ID - If applicable, enter the New Jersey State permit number of the waste carrying portion of the second vehicle.
- Item F: TRANSPORTER PHONE - If applicable, enter a telephone number with area code where an authorized agent of the second transporter may be reached.
- Item G: STATE FACILITY'S ID - No entry is required by New Jersey.
- Item H: FACILITY PHONE - Enter a telephone number with area code of the TSDF designated to receive the waste listed on the manifest.
- Item I: WASTE NO.- Enter the 4-digit hazardous waste number as it appears in N.J.A.C. 7:26G-5.1 g1 seq. (For example K047 is the waste number designated for pink/red water from TNT operations.) The proper waste number that accurately describes the shipment, shall be determined according to the hierarchy at N.J.A.C. 7:26G-6.2.
- Item J: ADDITIONAL DESCRIPTIONS FOR MATERIALS LISTED ABOVE - Enter description of analysis for any waste which does not have a complete USDOT shipping description or has an n.o.s. designation. Enter a general description of the waste stream, (i.e. groundwater contaminated with creosote and copper sulfate). Additionally, for any n.o.s. entry in item 11 which does not conform to the requirements at 49 CFR 172.203(K) enter the two components, and their percentages, which most predominantly contribute to the hazards of the mixture or solution. Enter the physical state (S = Solid, L = Liquid, G = Gas, SL = Sludge) EPA hazard codes (I = Ignitable, C = Corrosive, R = Reactive, E = TCLP, H = Acute Hazardous, T = Toxic). Enter additional information as required by the waste code hierarchy at N.J.A.C. 7:26G-6.2.

TRANSPORTER SECTION

- It is a violation by the transporter if he accepts hazardous waste from a generator who fails to properly complete the manifest, transports waste to an unauthorized facility, and/or fails to obtain the date and handwritten signature, of the next hauler owner/operator of the TSDF facility on the manifest.
- Item 17: TRANSPORTER 1 ACKNOWLEDGEMENT- Print or type the name of the person accepting the waste on behalf of the first transporter. That person must acknowledge acceptance of the waste described on the manifest by signing and entering the date of receipt.
- Item 18: TRANSPORTER 2 ACKNOWLEDGEMENT- If applicable, follow instructions for item 17 for the second transporter.
- NOTE: ALL HAZARDOUS WASTE TRANSPORTERS OPERATING IN NEW JERSEY MUST HAVE A VALID NEW JERSEY HAZARDOUS WASTE TRANSPORTER'S PERMIT.

DESIGNATED FACILITY (TSDF) SECTION

- Item 19: DISCREPANCY INDICATION SPACE- The authorized representative of the designated facility must note in this space any significant discrepancy between the waste described on the manifest and the waste actually received at the facility. Any rejected materials should be listed here, along with an explanation of the disposition of the rejected wastes. Owners and operators of facilities located in authorized States (i.e., those States that received authorization from the U.S. EPA to administer the hazardous waste program) should contact their State agency for information on State Discrepancy Report requirements.
- Item 20: FACILITY OWNER/OPERATOR CERTIFICATION- Print or type the name of the person receiving the waste on behalf of the owner/operator of the designated TSDF. That person must acknowledge receiving the waste described on the manifest by signing and entering the date of receipt.
- Item K: HANDLING CODES-TSDF SHOULD COMPLETE- Enter the ultimate handling method utilized at the designated facility for each waste. Only the following process codes may be used:
Storage = S01 (Container); S02 (Tank); S04 (Surface Impoundment); S05 (Other-Specify);
Treatment = T01 (Tank); T02 (Surface Impoundment); T03 (Incinerator); T04 (Other-specify);
Disposal = D79 (Injection Well); D80 (Landfill); D81 (Land Application); D82 (Ocean Disposal);
D83 (Surface Impoundment); D84 (Other-Specify)
- *NOTE: For interstate shipments you may be required to comply with the manifesting requirements of both the consignment and generator states regarding the completion of specific information included in lettered items A-K. Please check with both generator and consignment states for specific requirements. New Jersey requires that all information be filled in except for item "G".

Public reporting burden for this collection of information is estimated to average: 37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment, storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimates including suggestions for reducing this burden, to: Chief, Information Policy Branch, PM-223. U.S. Environmental Protection Agency, 401 M Street, SW, Washington, DC 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503

LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM PHASE IV

Page 1 of 1

Generator Name: USEPA Region II EPA ID # NJCESQG State Manifest No. NJA4145055

1. If waste is a wastewater (see 40 CFR 268.2) place "w" next to the applicable code(s)

Profile # 612081

2. CODES WITH SUBCATEGORIES (place appropriate letter from section 8 before each code that applies) (See 40 CFR 268 for details)

- | | | | | |
|--|---|---|---|---|
| <input checked="" type="checkbox"/> D001 HI-TOC | <input type="checkbox"/> D008 Lead acid batteries | <input type="checkbox"/> K069 Not Calcium Sulfate | <input type="checkbox"/> P065 Lo RMERC Res. | <input type="checkbox"/> U151 HI Hg |
| <input checked="" type="checkbox"/> D001 Except HI-TOC | <input type="checkbox"/> D009 Organic Hg > 260ppm | <input type="checkbox"/> K071 Rmerc Res. | <input type="checkbox"/> P065 Not Inc./RMERC Res. | <input type="checkbox"/> U240 2, 4 D |
| <input type="checkbox"/> D003 Reactive Cyanide | <input type="checkbox"/> D009 Inorg. Hg > 260 | <input type="checkbox"/> K071 Not Rmerc Res. | <input type="checkbox"/> P065 HI Inc./RMERC Res. | <input type="checkbox"/> U240 2, 4 esters & Salts |
| <input type="checkbox"/> D003 Reactive Sulfide | <input type="checkbox"/> D009 Hg < 260 | <input type="checkbox"/> K106 Lo Rmerc Res. | <input type="checkbox"/> P092 Lo Inc. Res. | |
| <input type="checkbox"/> D003 Explosive | <input type="checkbox"/> F025 Light ends | <input type="checkbox"/> K106 Not Rmerc Res. | <input type="checkbox"/> P092 Lo RMERC Res. | |
| <input type="checkbox"/> D003 Water Reactives | <input type="checkbox"/> F025 Spent filter | <input type="checkbox"/> K106 > 260 ppm Hg | <input type="checkbox"/> P092 Not Inc./RMERC Res. | |
| <input type="checkbox"/> D003 Unexp Ord. Emg | <input type="checkbox"/> K006 Hydrated | <input type="checkbox"/> P047 Salts | <input type="checkbox"/> P092 HI Inc./RMERC Res. | |
| <input type="checkbox"/> D003 Other Reactives | <input type="checkbox"/> K006 Anhydrous | <input type="checkbox"/> P047 Nonsalts | <input type="checkbox"/> U151 Lo RMERC Res. | |
| <input type="checkbox"/> D006 Batteries | <input type="checkbox"/> K069 Calcium Sulfate | <input type="checkbox"/> P065 Lo Inc. Res. | <input type="checkbox"/> U151 Lo Not RMERC Res. | |

The subcategory for D018-D043 waste is "treated in nonCWA/nonSDWA facility" unless the following box is checked: ☐ "treated in CWA/SDWA facility"

3. COMMON CODES (Place appropriate letter from section 8 before each code that applies)

- | | | | | | | | | | | | | | | | |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D002 | <input type="checkbox"/> P012 | <input type="checkbox"/> P030 | <input type="checkbox"/> P051 | <input type="checkbox"/> P098 | <input type="checkbox"/> P105 | <input type="checkbox"/> P205 | <input type="checkbox"/> F006 | <input type="checkbox"/> F007 | <input type="checkbox"/> F008 | <input type="checkbox"/> F009 | <input type="checkbox"/> F010 | <input type="checkbox"/> F011 | <input type="checkbox"/> F012 | <input type="checkbox"/> F019 | <input type="checkbox"/> F039 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D005 | <input type="checkbox"/> D006 | <input type="checkbox"/> D007 | <input type="checkbox"/> D008 | <input type="checkbox"/> D009 | <input type="checkbox"/> D010 | <input type="checkbox"/> D011 | <input type="checkbox"/> D012 | <input type="checkbox"/> D013 | <input type="checkbox"/> D014 | <input type="checkbox"/> D015 | <input type="checkbox"/> D016 | <input type="checkbox"/> D017 | <input type="checkbox"/> D018 | <input type="checkbox"/> D019 |
| <input type="checkbox"/> D020 | <input type="checkbox"/> D021 | <input type="checkbox"/> D022 | <input type="checkbox"/> D023 | <input type="checkbox"/> D024 | <input type="checkbox"/> D025 | <input type="checkbox"/> D026 | <input type="checkbox"/> D027 | <input type="checkbox"/> D028 | <input type="checkbox"/> D029 | <input type="checkbox"/> D030 | <input type="checkbox"/> D031 | <input type="checkbox"/> D032 | <input type="checkbox"/> D033 | <input type="checkbox"/> D034 | <input type="checkbox"/> D035 |
| <input type="checkbox"/> D036 | <input type="checkbox"/> D037 | <input type="checkbox"/> D038 | <input type="checkbox"/> D039 | <input type="checkbox"/> D040 | <input type="checkbox"/> D041 | <input type="checkbox"/> D042 | <input type="checkbox"/> D043 | <input type="checkbox"/> F001 | <input type="checkbox"/> F002 | <input type="checkbox"/> F003 | <input type="checkbox"/> F004 | <input type="checkbox"/> F005 | <input type="checkbox"/> U002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U006 |
| <input type="checkbox"/> U007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U061 | <input type="checkbox"/> U072 | <input type="checkbox"/> U080 | <input type="checkbox"/> U108 | <input type="checkbox"/> U117 | <input type="checkbox"/> U122 | <input type="checkbox"/> U123 | <input type="checkbox"/> U136 | <input type="checkbox"/> U154 | <input type="checkbox"/> U188 | <input type="checkbox"/> U213 | <input type="checkbox"/> U220 | <input type="checkbox"/> U226 | <input type="checkbox"/> U279 |
| | | | | | | | | | | | | | | | <input type="checkbox"/> K061 |

ADDITIONAL CODES (Enter all codes not identified above which are associated with waste)

4. USEPA HAZARDOUS WASTE CODE(S)	5. TREATMENT STANDARDS FOR NON-PHASE II STATES (INDICATE THE APPLICABLE TREATMENT STANDARD 268.41, 268.43 OR SPECIFIED TECHNOLOGY BELOW)	6. HOW MUST THE WASTE BE MANAGED? ENTER THE LETTER FROM BELOW

To identify F039, or UHCs managed in non-CWA, use the "F039/Underlying Hazardous Constituents Form" provided and check here: ☐

If no UHCs are present upon generation check here: ☐ Check here if disposal facility will check for all UHCs ☐ (i.e. no UHC form required)

To list additional EPA waste code(s), use the supplemental sheet and check here: ☐ In lieu of supplemental sheet you may use multiple copies of this form.

7. SOLVENT CONSTITUENTS (F001 - F005) Check here if disposal facility will check for all spent solvents

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> Acetone | <input type="checkbox"/> Benzene | <input type="checkbox"/> n-Butyl alcohol | <input type="checkbox"/> Carbon disulfide |
| <input type="checkbox"/> Carbon Tetrachloride | <input type="checkbox"/> Chlorobenzene | <input type="checkbox"/> O-Cresol | <input type="checkbox"/> Cresols (m&p) |
| <input type="checkbox"/> Cyclohexanone | <input type="checkbox"/> o-Dichlorobenzene | <input type="checkbox"/> 2-Ethoxyethanol | <input type="checkbox"/> Ethyl acetate |
| <input type="checkbox"/> Ethyl benzene | <input type="checkbox"/> Ethyl ether | <input type="checkbox"/> Isobutanol | <input type="checkbox"/> Methanol |
| <input type="checkbox"/> Methylene chloride | <input type="checkbox"/> Methyl ethyl ketone | <input type="checkbox"/> Methyl isobutyl ketone | <input type="checkbox"/> Nitrobenzene |
| <input type="checkbox"/> 2-Nitropropane | <input type="checkbox"/> Pyridine | <input type="checkbox"/> Tetrachloroethylene | <input type="checkbox"/> Toluene |
| <input type="checkbox"/> 1,1,1 Trichloroethane | <input type="checkbox"/> 1, 1, 2-Trichloroethane | <input type="checkbox"/> 1, 1, 2-Trichloro, 1, 2, 2-trifluoroethane | <input type="checkbox"/> Trichloroethylene |
| <input type="checkbox"/> Trichloromonofluoromethane | <input type="checkbox"/> Xylenes | | |

8. (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.)

A. or ☒ RESTRICTED WASTE REQUIRES TREATMENT

This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40.

☐ For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."

B.1 RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS

"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."

B.2 (CERTIFICATION REMOVED BY PHASE IV)

B.3 GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS

"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the nonwastewater organic constituents have been treated by combustion units as specified in 268.42, Table 1. I have been unable to detect the nonwastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."

B.4 DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS

"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."

C. RESTRICTED WASTE SUBJECT TO A VARIANCE

This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.

☐ For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."

D. RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT

"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."

E. WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS

This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Signature

Title EPA On-Scene Coordinator

Date 6/17/03

GENERATOR COPY

Generator:
 Generator Number: 999999
 USEPA REGION II
 2ND AND WATER STREET

Manifest Number : NJA4145055
 Field System ID : NN
 Work Order Number: 9999999999
 Date Shipped : 6/17/2003
 Document Number : 99999

PERTH AMBOY, NJ 08861

ATTN :

EPA ID: NJCESQG

Container#: NN 9999999999 001

PG: 1 LN: A

WIP: 612081 Disposal code: CWD HOLD

FHY State: G

Date Accumulated: 6/17/2003 Waste Area:

Special Handling: / 0.00

Shipping Name: WASTE ACETYLENE, DISSOLVED
 2.1,UN1001

No. of Commons: 01 Waste No: I/D001

Outer Container: 851A2 DM Cubic Feet: 11.40

Units	Container Size	Net Weight	Chemical Name
0001	cylin		ACETYLENE CYLINDER 100%

Waste Number: D001

Container Weight: 00200 SIC: 9999 Source: G11 Form: W801 Origin: 1 System:

END OF REPORT

ONYX ENVIRONMENTAL SERVICES

~~ONYX~~

Generator

EPA ID: NJCESQG

USEPA REGION II

2ND AND WATER STREET

PERTH AMEY

NJ 08861 0000

ATTN:

Work Order #: 9999999999

Manifest#: NJA4145055

Ship Date: 6/17/2003

Purchase Order:

Project Code:

Destination

EPA ID: NJD980536593 ONYX ENVIRONMENTAL SERVICES

Transporter

EPA ID: NJD080631369 ONYX ENVIRONMENTAL SVCS L.L.C.

Overnight:N Emergency Response:N

DISPOSAL

WIP/

UNITS UOM

APPRV DESCRIPTION

GROSS TYPE WASTE AREA

1 851A2 DMF 612081 ACETYLENE CYLINDER
CWD HOLD

200 FS

Manifest PG/LN: 1A

TOTAL

TOTAL

1

200

EMPLOYEE

CODE	DESCRIPTION	LUN	IN	OUT	QTY	WASTE AREA
936	TECHNICAL SUPERVISOR	N	8:00	9:00	1	
944	TECHNICAL ASSISTANT	N	8:00	9:00	1	

MATERIALS

CODE	DESCRIPTION	QTY	WASTE AREA
13	851A2 - 85 GAL SALVAGE DRUM	1	
31	VERMICULITE, 4 CUFT BAG	2	

COMMENTS

Gio R & George P on site 8:10 TO 9:30

This is to document that the facility designated above is authorized by applicable State and/or Federal agencies, has the capacity and will provide or assure that the ultimate disposal method is followed for the particular Hazardous Waste that is planned for shipment.

Date: 06-17-03

Customer Signature: 

O N Y X E S Signature: _____

Generator:
 Generator Number: 999999
 USEPA REGION II
 2ND AND WATER STREET

Manifest Number : NJA4145055
 Field System ID : NN
 Work Order Number: 9999999999
 Date Shipped : 6/17/2003
 Document Number : 99999

PERTH AMBOY, NJ 08861
 ATTN :
 EPA ID: NJCESGG

Container#: NN 9999999999 001 FG: 1 LN: A
 WIP: 612081 Disposal code: CWD HOLD PHY State: G
 Date Accumulated: 6/17/2003 Waste Area: Special Handling: / 0.00

Shipping Name: WASTE ACETYLENE, DISSOLVED
 2.1,UN1001

No. of Commons: 01 Waste No: I/D001 Outer Container: 851A2 DM Cubic Feet: 11.40

Units	Container	Net	Chemical
	Size	Weight	Name
0001	cylin		ACETYLENE CYLINDER 100%

Waste Number: D001

Container Weight: 00200 SIC: 9999 Source: G11 Form: W901 Origin: 1 System:

END OF REPORT